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July 19, 2014

Supervisor Zev Yaroslavsky  
821 Kenneth Hahn Hall of Administration  
500 West Temple  
Los Angeles, CA 90012

Supervisor Don Knabe  
822 Kenneth Hahn Hall of Administration  
500 West Temple  
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Supervisor Michael Antonovich  
869 Kenneth Hahn Hall of Administration  
500 West Temple  
Los Angeles, CA 90012

Supervisor Mark Ridley-Thomas  
866 Kenneth Hahn Hall of Administration  
500 West Temple  
Los Angeles, CA 90012

Supervisor Gloria Molina

856 Kenneth Hahn Hall of Administration  
500 West Temple  
Los Angeles, CA 90012

**Re: Motion by SUPERVISOR MARK RIDLEY-THOMAS:  
Initial Steps to Support a Comprehensive Diversion  
Plan for Los Angeles County**

Dear Hon. Supervisors:

I have reviewed and like very much Supervisor Mark Ridley-Thomas' motion. I have previously written to the members of the Board of Supervisors about the benefits of diversion over jail programs (copy below, including my biographic information). For example, individuals who enter jail with a substance abuse problem are quite likely to leave jail with a substance abuse problem, especially where the jail is crowded and there is little in the way of substance abuse treatment in the jail; whereas individuals who complete a bona fide substance abuse treatment program in the community have a 60%-80% likelihood of being clean and sober after three years. The data are equivalent for individuals with mental illness. Supervisor Ridley-Thomas cites in his Motion clear statistics to that effect: "Numerous successful programs throughout the country can guide efforts in the County. These include New York City's Nathaniel Project with a reported 70% reduction in arrests over a two-year period; Chicago's Thresholds program with an 89% reduction in arrests, 86% reduction in jail time, and a 76% reduction in hospitalization for program participant; and Seattle's FACT program with a 45% reduction in jail and prison bookings. The Miami-Dade County program, with access to community-based services and supportive housing resources, has reduced recidivism from 75% to 20% for program participants." The story behind these statistics is that individuals with mental illness and substance abuse problems do not do well in jail. As the Department of Justice has recently concluded, and as I concluded in my

Report for the ACLU of Southern California in 2008, mental health services at L.A. County Jail are quite inadequate. Meanwhile, inmates with mental illness and substance abuse problems sit idly in the crowded jail and leave jail no better prepared to succeed at "going straight" in the community. In contrast, with the diversion services that this Motion proposes to fund and to study, individuals who come in contact with the Criminal Justice System have a pretty good chance of receiving the treatment they need in the community and living a much more productive life.

Clearly, if diversion is to be expanded to help reduce the jail population, to save the county a large amount of money and to improve the outcome for a large number of individuals with substance abuse problems and/or mental illness, then funds need to be allocated up front to make diversion work. I urge you to vote in favor of Supervisor Ridley-Thomas' motion. Thank you for your consideration.

Sincerely,

*Terry A. Kupers/s*

Terry A. Kupers, M.D., M.S.P.

Cc: Elan Shultz, Health Deputy  
Flora Gil Krisiloff  
Joel Sappell  
Carl Galluci  
R. Velasquex  
Richard Espinosa  
Anna Pembedjian  
Fred Leaf  
N. Jenkins  
Alex Johnson  
Yolanda Vera  
Steve Reyes  
Michelle Cervera  
Jackie Lacey  
William Hodgman

Copy of May 20 letter:

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May 20, 2013

Supervisor Zev Yaroslavsky  
856 Kenneth Hahn Hall of Administration  
500 West Temple  
Los Angeles, CA 90012

Re: Motion on L.A. County Jail for May 21, 2013

Dear Supervisor Yaroslavsky:

Thanks to you and the Board for taking on the timely topic of individuals with mental illness in the Los Angeles County Jail. I am quite concerned about the extraordinarily large number of individuals with serious mental illness confined in the Los Angeles County Jail, the harsh conditions they are forced to endure, the inadequate mental health care they receive, and the resulting damage to their psychiatric condition and their prognosis. I am a Board-certified psychiatrist, Institute Professor at The Wright Institute, Distinguished Life Fellow of the American Psychiatric Association and recipient of the 2005 Exemplary Psychiatrist Award from the National Alliance on Mental Illness (NAMI). My publications include the book, *Prison Madness: The Mental Health Crisis Behind Bars and What We Must do About It* (Jossey-Bass/ Wiley, 1999), and I am

Contributing Editor of *Correctional Mental Health Report*. I have served as a psychiatric expert in numerous class action lawsuits involving the psychiatric effects of jail and prison conditions, the quality of mental health treatment in correctional settings and the effects of sexual abuse on prisoners.

I was retained by the ACLU and testified in 1978 as a psychiatric expert in the Rutherford class action lawsuit about crowding and mental health care at Los Angeles County Jail. In 2008 I was asked to tour the jail again and I submitted a Report about my findings (available at [http://www.aclu.org/pdfs/prison/lacountyjail\\_kupersreport.pdf](http://www.aclu.org/pdfs/prison/lacountyjail_kupersreport.pdf)). I also provided testimony to the Citizen's Commission on Jail Violence (see Report of the Citizens' Commission on Jail Violence, September 2012, available at <http://ccjv.lacounty.gov>). During my 2008 inspection of L.A. County Jail I found continued crowding and grossly inadequate mental health services. While a certain amount of acute mental health treatment is available at Twin Towers, a large number of prisoners with serious mental illness are essentially warehoused at Men's Central Jail and receive very little in the way of mental health treatment.

Your motion calls for urgently needed attention and action to remedy the shameful conditions of confinement and inadequate mental health treatment at L. A. County Jail. It is very true that "a large number of our inmates suffer from mental illness" and "law enforcement agencies have unfortunately become the caretakers of last resort for many of these mentally ill individuals." Nationwide, well over 30% of jail inmates are known to suffer from serious mental illness. They suffer tremendously in overcrowded jails where there are no programs and too little in the way of mental health treatment. L. A. County Jail is no exception. There is a large amount of research showing that jail crowding results in increased rates of violence, psychiatric breakdown and suicide.

In my 2008 Report about L. A. County Jail, I wrote: "Considering the large proportion of jail prisoners with significant and serious mental illness, relatively few prisoners in the Los Angeles County Jail are receiving mental health treatment. By my calculations, only 11.8% of male prisoners in the Los Angeles County Jail are on the mental health caseload...."

It is important to note that, of the 2,088 individuals reported on the mental health caseload, at least 350 are receiving only medications while being subjected to severe crowding or isolation and receiving no mental health programming - this is far from adequate mental health treatment. I would estimate with a high degree of certainty that at least double the number on the current caseload need mental health treatment....”

I continued: “Conditions at Men’s Central Jail today are eerily similar to the conditions in 1978 when I submitted a declaration in Rutherford. In that declaration, I wrote that ‘... many of these mentally disordered prisoners are receiving psychotropic medications; prisoners are rarely seen by psychiatrists or by mental health technicians and do not receive individual or group psychotherapy; prisoners are managed by deputy sheriffs who have no training in handling psychiatric patients; most of the prisoners receive no opportunity to exercise indoors or outdoors; most are locked alone in their one-man cells almost all the time, including meals....’ I offered similar observations about the multiple-occupancy cells and dormitories. It is stunning how unchanged the conditions are in the Men’s Central Jail, and how the men therein are still relegated to idleness in a cell and still lack adequate mental health treatment.”

In my 2008 Report I also pointed out that prisoners with mental illness disproportionately fall victim to “use of force” by officers, in all too many cases this constitutes excessive force, and I explained: “The same conditions that worsen psychiatric disorders also affect the staff and make treatment problematic. After all, the staff, both custody and mental health staff, spend quite a lot of time in the crowded conditions. Their irritability is enlarged by the noise and the crowding, and, on average, staff tend to become increasingly insensitive to prisoner concerns when they have to interact with masses of prisoners each day. Officers become impatient, and are prone to gruffness, which leads to prisoners feeling disrespected and becoming angry. Then, the prisoner’s anger causes the officers to punish them, often for rather minor infractions, and the prisoners become more resentful. It is in this unfortunate mix that excessive force and other abuses become more frequent occurrences.”

I will not reiterate here all the findings in my 2008 Report, but I do want to share my thoughts about the motion you are proposing. Given the unacceptable level of crowding, the unacceptable (and unconstitutional) inadequacies in the mental health

delivery system, and the excessive use of force with prisoners suffering from mental illness, there is an urgent need for beds where prisoners with mental illness can be provided the intensity and quality of mental health treatment their condition requires. But I am concerned about the exclusive focus in your motion on beds being established inside the jail! A much more effective and less costly option would be to divert a significant number of prisoners with serious mental illness to non-correctional settings, for example residential mental health and substance abuse treatment programs in the community. Jail crowding is known to correlate with increased rates of violence, psychiatric breakdown and suicide. Sure enough, all three are huge problems at L.A. County Jail. Meanwhile, with such a larger number of prisoners, it is less possible for mental health clinicians to provide adequate services. While I welcome expansion of the number of dedicated mental health treatment beds at LA County Jail, that does not address the crowding problem, and as occurred when Twin Towers was built, the additional programs that the new construction would permit will be quickly overwhelmed by the urgent needs of too many prisoners. The jail is far beyond capacity, worse after re-alignment. Any effective remedy must involve a decrease in the population. The clinical literature reflects much better treatment outcomes and much lower recidivism rates for individuals with serious mental illness when they are diverted from jail and treated in the community. I know there are many high quality community treatment programs in Los Angeles County. And I know that there are many individuals with serious mental illness who could be diverted to non-correctional settings for treatment without in any way jeopardizing public safety. I urge you to alter and expand your already very good motion to include mental health treatment options in non-correctional settings. Thank you for taking up this very important issue, and for considering my comments.

Sincerely,

*Terry A. Kupers/s*

Terry A. Kupers, M.D., M.S.P.